

510(k) Summary

JUL 1 2 2013

In accordance with 21 CFR 807.92 the following summary of information is provided:

Date: May 24, 2013

Submitter: GE Healthcare, GE Vingmed Ultrasound AS

Strandpromenaden 45 N-3191, Horten, Norway

Primary Contact Person: Bryan Behn

Regulatory Affairs Manager

GE Healthcare, GE Medical Systems Ultrasound and Primary

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Regulatory Affairs Manager GE Vingmed Ultrasound AS

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Device: Trade Name: Vivid E9 Diagnostic Ultrasound System

Common/Usual Name: Vivid E9
Classification Names: Class II

Product Code: Ultrasonic Pulsed Doppler Imaging System. 21CFR 892.1550 90-IYN

Ultrasonic Pulsed Echo Imaging System, 21CFR 892.1560, 90-IYO Diagnostic Ultrasound Transducer, 21 CFR 892.1570, 90-ITX

<u>Predicate Device(s):</u> K120201 GE Vivid E9 Diagnostic Ultrasound System

K031663 GE Vivid 7 Diagnostic Ultrasound System K123564 GE Logiq E9 Diagnostic Ultrasound System

K120221 GE EchoPac Workstation

Device Description: GE Vivid E9 is a Track 3 diagnostic ultrasound system, which is

primarily intended for cardiac imaging and analysis, but which also includes vascular and general radiology applications. The Vivid E9 incorporates a variety of electronic array transducers operating in linear, curved linear, sector/phased array or matrix array format, including two dedicated CW transducers and several real time 3D transducers. It consists of a mobile console with keyboard control panel; color LCD/TFT touch panel, LCD color video display and optional image storage and printing devices. It provides high performance ultrasound imaging and analysis and has comprehensive networking and DICOM

capability.



Intended Use: GE Vivid E9 ultrasound system is a general-purpose ultrasound system, specialized for use in cardiac imaging. It is intended for use by, or under the direction of a qualified physician for ultrasound imaging and analysis of Fetal; Abdominal (including renal and GYN); Pediatric; Small Organ (breast, testes, thyroid); Neonatal Cephalic; Adult Cephalic; Cardiac (adult and pediatric); Peripheral Vascular (PV); Musculo-skeletal Conventional; Urology (including prostate), Transesophageal; Transrectal (TR); Transvaginal (TV); and Intraoperative (abdominal, thoracic, & vascular).

Device Modification Overview:

The following is a brief overview of the differences between the proposed Vivid E9 and the predicate Vivid E9 (K120201).

Detailed information is found in section 11 of this submission. while section 12 includes a discussion of substantial equivalence with the predicate device(s).

The modified Vivid E9 will provide users with 5 additional transducers. 4 of which are already cleared with other GE ultrasound devices, while one is new.

The additional transducers are: M5Sc-D, C2-9-D, C1-5-D, iC5-9-D and 8C.

The subject modified Vivid E9 will also introduce two optional plug-in features originally cleared in their own right by their OEM manufacturers, TomTec and Sony Electronics.

The TomTec feature was also previously cleared for use with GE EchoPAC Workstation software for ultrasound image review, analysis and reporting (K120221).

- Mitral Valve Quantification Tool, TomTec 4D MV Assessment, K103782, is a software plug-in which will open and run in a separate window when launched on Vivid E9.
- StereoVision, visualization of real time 3D data on Sony LMD-2451MT LCD monitor, K113203, intended for 3D and 2D color video displays of clinical images.





The following modifications of existing features available on the predicate Vivid E9 will be introduced with the modified Vivid E9:

Alternative automated ROI tracing for the Auto EF and AFI features.

The Intended Use and Indications for Use of the device have not changed by this modification.

These modifications all lead to overall quality, image enhancement and ease of use of the Vivid E9.

Technology:

The Vivid E9 employs the same fundamental scientific technology as its predicate devices.

<u>Determination of</u> Substantial Equivalence:

Summary of Non-Clinical Tests:

The device has been evaluated for acoustic output safety, biocompatibility, cleaning and disinfection effectiveness as well as thermal, electrical, electromagnetic, and mechanical safety, and has been found to conform to applicable medical device safety standards. The Vivid E9 and its applications comply with voluntary standards:

- 1. IEC60601-1, Medical Electrical Equipment Part 1: General Requirements for Safety.
- 2. IEC60601-1-2, Medical Electrical Equipment –
 Part 1-2: General Requirements for Safety Collateral
 Standard: Electromagnetic Compatibility Requirements
 and Tests.
- 3. IEC60601-2-37, Medical Electrical Equipment –
 Part 2-37:Particular Requirements for the Safety of
 Ultrasonic Medical Diagnostic and Monitoring Equipment
- 4. NEMA UD 3, Standard for Real Time Display of Thermal and Mechanical Acoustic Output Indices on Diagnostic Ultrasound Equipment.
- 5. ISO10993-1, Biological Evaluation of Medical Devices- Part 1: Evaluation and Testing- Fourth Edition.
- 6. NEMA UD 2, Acoustic Output Measurement Standard for Diagnostic Ultrasound Equipment.
- 7. ISO14971, Application of risk management to medical devices



8. NEMA, Digital Imaging and Communications in Medicine (DICOM) Set. (Radiology)

The following quality assurance measures were applied to the development of the system:

- Risk Analysis
- Requirement Reviews
- Design Reviews
- Testing on unit level (Module verification)
- Integration testing (System verification)
- Performance testing (Verification)
- Safety testing (Verification)
- Final Acceptance Testing (Validation)

Summary of Clinical Tests:

The subject of this premarket submission, Vivid E9, did not require clinical studies to support substantial equivalence.

Conclusion:

GE Healthcare considers the Vivid E9 to be as safe, as effective, and performance is substantially equivalent to the predicate device(s).



Food and Drug Administration 10903 New Hampshire Avenue Document Control Center – WO66-G609 Silver Spring, MD 20993-0002

July 12, 2013

GE VINGMED ULTRASOUND AS % Mr. Bryan Behn Regulatory Affairs Manager GE Healthcare 9900 W. Innovation Drive WAUWATOSA WI 53226

Re: K131514

Trade/Device Name: GE Vivid E9 Diagnostic Ultrasound Imaging System

Regulation Number: 21 CFR 892.1550

Regulation Name: Ultrasonic pulsed doppler imaging system

Regulatory Class: II

Product Code: IYN, IYO, ITX

Dated: July 1, 2013 Received: July 2, 2013

Dear Mr. Behn:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

This determination of substantial equivalence applies to the following transducers intended for use with the GE Vivid E9 Diagnostic Ultrasound Imaging System, as described in your premarket notification:

	<u>Transducer Model Number</u>	
ML6-15-D	C1-5-D	3V-D
12S-D	C2-9-D	6VT-D
4V-D	9L-D	6T/6T-RS
i13L	. 11L-D	6Tc/6Tc-RS
iC5-9-D	M5S-D	9T/9T-RS
4C-D	M5Sc-D	P2D
8C	6S-D	P6D

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638 2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to http://www.fda.gov/MedicalDevices/Safetv/ReportaProblem/default.htm for the CDRH's Office

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

of Surveillance and Biometrics/Division of Postmarket Surveillance.

Sincerely yours,

Janine M. Morris

Director, Division of Radiological Health Office of In Vitro Diagnostics and Radiological Health

for

Center for Devices and Radiological Health

Enclosure





510(k) Number (if known): K131514

Device Name:

Vivid E9 Diagnostic Ultrasound System

Indications for Use:

GE Vivid E9 ultrasound system is a general-purpose ultrasound system, specialized for use in cardiac imaging. It is intended for use by, or under the direction of a qualified physician for ultrasound imaging and analysis of Fetal; Abdominal (including renal and GYN); Pediatric; Small Organ (breast, testes, thyroid); Neonatal Cephalic; Adult Cephalic; Cardiac (adult and pediatric); Peripheral Vascular (PV); Musculo-skeletal Conventional; Urology (including prostate), Transesophageal; Transrectal (TR); Transvaginal (TV); and Intraoperative (abdominal, thoracic, & vascular).

Prescription Use: X (Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use: N/A (Part 21 CFR 801 Subpart C)

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Page 1 of 23



Indications for Use Forms

The following forms represent indications with clinical applications and exam types along with the modes of operation for the Vivid E9 system and for all of its probe/mode combinations. Combinations identified by "N" are new while "P" represents those previously cleared with the unmodified Vivid E9 and "P*" represents new transducers that have been previously cleared on another GE Ultrasound System. The subject modification does not alter the previously cleared system level indications, clinical applications or modes of operation.



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 Ultrasound System

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					Mode	of Ope	eration		·-		
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	Power	Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic					,		<u>-</u>				
Fetal / Obstetrics	Р	Р	P	Р	Р	Р	Р	Р	Р	Р	Р
Abdominal ^[1]	P	P	P	Р	Р	Р	P	Р	Р	P	Р
Pediatric	₽	Р	P.	Р	Р	Р	P	P	P	Р	P
Small Organ ^[2]	P	Р	P		Р	Р	Р	Р	Р	Р	
Neonatal Cephalic	Р	Р	Р	Р	Р	Р	Р	Р	Р	Р	
Adult Cephalic	P,	P	Р	Р	P	Р	Р	Р	Р	Р	P
Cardiac ^[3]	Р	Р	P	Р	Р	P	Р	P	Р	Р	Р
Peripheral Vascular	Р	Р	Р	Р	Р	Р	Р	Р	Р	Р	
Musculo-skeletal Conventional	Р	Р	P	=	Р	Р	P	Р	Р	Р	
Musculo-skeletal Superficial											
Other ^[4]	Р	Р	Р	Р	Р	Р	P	P	P	Р	P
Exam Type, Means of Access											
Transesophageal	Р	Р	P	Р	P	Р	Р	Р	Р	Р	Р
Transrectal	Р	Р	Р		Р	P	Р	Р		Р	
Transvaginal	P	Р	Р		Р	P	Р	Р		р	
Transuretheral											ļ <u> </u>
Intraoperative ^[5]	Р	Р	Р		Р	Р	Р	Р	Р	Р	
Intraoperative Neurological											
Intravascular	-	<u> </u>									
Laparoscopic											

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [1] Abdominal includes renal, GYN/Pelvic

- [2] Small organ includes breast, testes, thyroid.
- [3] Cardiac is Adult and Pediatric.
- [4] Other use includes Urology/Prostate
- [5] Intraoperative includes abdominal, thoracic (cardiac), and vascular (PV).
- [*] Combined modes are B/M, B/Color M, B/PWD or CWD, B/Color/PWD or CWD, B/Power/PWD.
- [*] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

System provides real-time 3D and 4D acquisition when used with special 4D probes.

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Page 2 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with ML6-15-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					Мо	de of O	peration)		-	
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	<u> </u>	Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic											
Fetal / Obstetrics				,							
Abdominal											
Pediatric ^[2]	Р	Р	Р		Р	Р	P	Р	Р	P	
Small Organ ^{[1][2]}	Р	Р	Р		Р	Р	Р	Р	Р	P	
Neonatal Cephalic	Р	P	Р		Р	Р	Р	P	Р	Р	
Adult Cephalic											
Cardiac Adult											
Cardiac Pediatric					_				ļ		
Peripheral Vascular ^[2]	Р	P	Р		Р	Р	Р	Р	Р	P	
Musculo-skeletal Conventional ^[2]	Р	Р	P		Р	Р	Р	P	Р	Р	
Musculo-skeletal Superficial											
Other											_
Exam Type, Means of Access											
Transesophageal				ļ. <u></u>							
Transrectal			_								
Transvagina!											
Transurethral											
Intraoperative											
Intraoperative Neurological								<u> </u>			
Intravascular											
Laparoscopic											<u></u>

N = new indication, P = previously cleared by FDA; E = added under Appendix E

Notes: [1] Small organ includes breast, testes, thyroid.

- [2] Needle guidance imaging
- [*] Combined modes are B/M, B/Color M, B/PWD or CWD, B/Color/PWD or CWD, B/Power/PWD.
- [+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Page 3 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 12S-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

				· · · · · · · · · · · · · · · · · · ·	Mode	e of Op	eration)			
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color	Color M Doppler	Power	Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic											
Fetal / Obstetrics											
Abdominal			ļ . <u> </u>								
Pediatric	Р	Р	Р_	Р	Р	Р	Р	Р	Р	Р	
Small Organ			ļ		ļ						
Neonatal Cephalic	Р	Р	P	Р	P	Р	Р	Р	Р	P	
Adult Cephalic											
Cardiac ^[1]	Р	Р	P	Р	Р	P	Р	Р	P	P	
Peripheral Vascular			<u> </u>					<u> </u>			-
Musculo-skeletal Conventional										_	
Musculo-skeletal Superficial								ļ			
Other								ļ			
Exam Type, Means of Access									ļ		
Transesophageal					<u></u>						
Transrectal			ļ		<u> </u>			ļ			
Transvaginal			ļ <u> </u>								
Transuretheral			ļ								
Intraoperative (specify)											
Intraoperative Neurological		<u> </u>	1								
Intravascula <u>r</u>			ļ								
Laparoscopic											

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [1] Cardiac is Adult and Pediatric.

[*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.

[+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Page 4 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 4V-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

Mode of Operation											
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M	Power	Combined Modes	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic											
Fetal / Obstetrics	Р	Р	Р	Р	Р	P	Р	P	Р	Р	Р
Abdominal ^[1]	Р	Р	Р	Р	Р	Р	Р	P	Р	Р	P
Pediatric	Р	P	Р	Р	Р	Р	Р	Р	P	P	Р
Small Organ											
Neonatal Cephalic			<u> </u>								
Adult Cephalic	Р	Р	Р	Р	Р	P	Р	Р	Р	Р	Р
Cardiac ^[2]	Р	Р	P	Р	Р	Р	P	Р	P	Р	Р
Peripheral Vascular		i									
Musculo-skeletal Conventional		<u> </u>	ļ <u> </u>								
Musculo-skeletal Superficial			<u> </u>							<u></u>	
Other ^[3]	Р	Р	Р	Р	Р	P	Р	Р	Р	Р	P
Exam Type, Means of Access											
Transesophageal		<u> </u>									ļ
Transrectal									•		<u> </u>
Transvaginal											ļ
Transuretheral								<u> </u>		<u> </u>	ļ
Intraoperative (specify)						<u> </u>			_		<u> </u>
Intraoperative Neurological								<u> </u>			<u> </u>
Intravascular								ļ			<u> </u>
Laparoscopic				<u> </u>			<u> </u>			<u> </u>	<u> </u>

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [1] Abdominal includes renal, GYN/Pelvic

- [2] Cardiac is Adult and Pediatric.
- [3] Other use includes Urology/Prostate
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Page 5 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with i13L Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

·	-	·			Mode	of Op	eration	 1			
Clinical Application Anatomy/ Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M	Power	Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic			<u> </u>								ļ <u></u> -
Fetal / Obstetrics								ļ			
Abdomina! ^[1]	Р	Р	Р		Р	P	Р	P		Р	
Pediatric			<u> </u>								
Small Organ (specify)									ļ		L
Neonatal Cephalic											
Adult Cephalic						<u> </u>					
Cardiac ^[2]	Р	Р	Р		Р	Р	P	Р		Р	<u> </u>
Peripheral Vascular											
Musculo-skeletal Conventional			<u> </u>			ļ					<u> </u>
Musculo-skeletal Superficial			<u> </u>								
Other (specify)											
Exam Type, Means of Access					ļ		ļ				
Transesophageal					<u> </u>						
Transrectal				1	ļ	ļ		ļ		_	
Transvaginal			<u> </u>	<u> </u>				ļ <u>.</u>			
Transuretheral			<u> </u>			ļ	ļ	<u> </u>			
Intraoperative ^[3]	Р	Р	P		Р	Р	Р	P	.	Р	
Intraoperative Neurological					<u> </u>		ļ. <u>.</u>				
Intravascular					ļ		ļ				ļ
Laparoscopic			<u></u>				<u> </u>				<u> </u>

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [1] Abdominal includes renal, GYN/Pelvic

- [2] Cardiac is Adult and Pediatric via Intraoperative;
- [3] Intraoperative includes abdominal, thoracic, and vascular.
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Page 6 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with iC5-9-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					Mode	of Op	eratio	n			
Clinical Application Anatomy/ Region of Interest	В	. M	PW Doppler	CW Doppler	Color Doppler	Color M Doppler			Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic	·										ļ
Fetal / Obstetrics	P*	P*	P*		P*	P*	P*	₽*	P*	P*	
Abdominal			<u> </u>								ļ
Pediatric			<u> </u>					<u> </u>			
Small Organ (specify)			ļ <u>.</u>								
Neonatal Cephalic			<u> </u>								
Adult Cephalic											
Cardiac			<u> </u>								
Peripheral Vascular						ļ					ļ <u> </u>
Musculo-skeletal Conventional			<u> </u>								ļ <u>.</u>
Musculo-skeletal Superficial								ļ			
Other ^[4]	P*	P*	P*		P*	P*	P*	P*	₽*	P*	
Exam Type, Means of Access			<u> </u>					<u> </u>			
Transesophageal			<u>.</u>			<u></u>					<u>.</u>
Transrectal	P*	P*	P*		P*	P*	P*	P*		P*	
Transvaginal	P <u>*</u>	P*	P*		P*	P*	Р*	P*		P*	
Transuretheral			<u> </u>								
Intraoperative (specify)											
Intraoperative Neurological					<u> </u>						
Intravascular							<u> </u>				
Laparoscopic						<u> </u>				<u></u>	

N = new indication; P* = previously cleared by FDA on LOGIQ E9 (K123564); E = added under Appendix E

Notes: [4] Other use includes Urology/Prostate,

[*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.

[*] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Page 7 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 4C-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					Mode	of Op	eratio	n			
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler			Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic								ļ			
Fetal / Obstetrics	Р	P	Р		P	Р	Р	Р	Р	Р	
Abdominal	P	Р	P		Р	Р	Р	Р	Р	Р	
Pediatric	Р	Р	P		P	Р	р	Р	Р	P	
Smail Organ ^[2]											
Neonatal Cephalic	_										
Adult Cephalic			ļ								
Cardiac			ļ.			ļ					
Peripheral Vascular	Р	Р	Р		Р	Р	Р	Р	Р	Р	
Musculo-skeletal Conventional		ļ				<u> </u>					
Musculo-skeletal Superficial		<u>.</u>	<u> </u>			<u> </u>					<u> </u>
Other ^[4]	P	Р	P	ļ	P	Р	Р	P	Р	Р	
Exam Type, Means of Access			,			ļ		ļ		<u> </u>	ļ
Transesophageal			<u> </u>			ļ					ļ
Transrectal	<u> </u>		ļ			ļ		ļ		ļ	<u> </u>
Transvaginal			_					ļ			ļ —
Transuretheral						ļ <u></u>					
Intraoperative (specify)		<u> </u>				<u> </u>		<u> </u>			
Intraoperative Neurological			ļ		ļ	ļ		ļ		-	
Intravascular											
Laparoscopic					<u> </u>				<u> </u>		

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [2] Small organ includes breast, testes, thyroid.

- [4] Other use includes Urology/Prostate
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Page 8 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 8C Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					Mode	of Op		1	,		
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppier	Color Doppler	Color M Doppler			Harmonic Imaging	Coded Pulse	RT3D Mode
Ophthalmic						_					
Fetal / Obstetrics											
Abdominal ^[1]	P*	P*	P*		P*	P*	P*	P*		P*	
Pediatric	P*	P* _	P*		P*	P*	P*	P*		P*	
Small Organ (specify)	P*	P*	P*_		P*	P*	P*	₽*		P*	
Neonatal Cephalic	Р*	P*	P* _		P*	P*	P*	P*		P*_	
Adult Cephalic			<u> </u>		ļ						
Cardiac					ļ						
Peripheral Vascular	Р*	P*	P*		P*	P*_	P*	P*		P*	
Musculo-skeletal Conventional		<u> </u>				ļ . <u> </u>	ļ		<u> </u>		
Musculo-skeletal Superficial					ļ						
Other ^[4]			ļ								ļ
Exam Type, Means of Access			ļ								ļ <u>-</u>
Transesophageal			ļ		ļ						ļ
Transrectal					ļ	ļ			ļ		ļ
Transvaginal			<u>.</u>	ļ				ļ			ļ
Transuretheral			ļ	ļ		_	<u> </u>				
Intraoperative (specify)			<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	<u> </u>	ļ		
Intraoperative Neurological					ļ		ļ		<u> </u>		ļ <u>.</u>
Intravascular	· · · · · · ·			<u> </u>			<u> </u>		ļ		<u> </u>
Laparoscopic											<u></u> _

N = new indication; P* = previously cleared by FDA on Vivid 7 (K031663); E = added under Appendix E

Notes: [1] Abdominal includes GYN/Pelvic, Renal and Aorta-iliac artery;

[*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.

[•] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 9 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with C1-5-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

		Mode of Operation									
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	Power	Combined Modes	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic											
Fetal / Obstetrics	P*	₽*	P*		P*	P*	P*	P*	P*	P*	
Abdominal ^[1]	P*	₽*	P*	<u></u>	P*	P*	P*	P*	P*	P* -	
Pediatric	P*	P*	P*		P*	P*	Р*	P*	P*	P*	<u></u>
Small Organ ^[2]			<u> </u>								<u> </u>
Neonatal Cephalic										·	<u> </u>
Adult Cephalic											
Cardiac			<u> </u>					<u> </u>			
Peripheral Vascular	P*	P*	P*		P*	P*	P*	P*	P*	P*	
Musculo-skeletal Conventional											ļ
Musculo-skeletal Superficial											
Other ^[4]	P*	P*	P*		P*	P*	P*	P*	P*	P*	
Exam Type, Means of Access											
Transesophageal											
Transrectal			<u> </u>								
Transvaginal							ļ				
Transuretheral											
Intraoperative (specify)			ļ								
Intraoperative Neurological											
Intravascular			ļ								
Laparoscopic						<u> </u>					

N = new indication; P* = previously cleared by FDA on LOGIQ E9 (K123564); E = added under Appendix E

Notes: [1] Abdominal includes Renal, GYN/Pelvic.

- [2] Small organ includes breast, testes, thyroid.
- [4] Other use includes Urology/Prostate
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 10 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with C2-9-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					1	of Op			Γ	T	T
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	Power Doppler		Harmonic Imaging	Coded Pulse	Othe
Ophthalmic									-		ļ
Fetal / Obstetrics	P*	P*_	P*		P*	P*	P*	P*	P*	P*	
Abdominal ^[1]	P*	P*	P*		P*	P*	P*	P*	P*	P*_	ļ
Pediatric	P*	P*	P*		P*	P*	P*	P*	P*	P*	ļ .
Small Organ (specify)							,	<u> </u>			
Neonatal Cephalic			ļ			ļ <u></u> -					
Adult Cephalic						· .					
Cardiac		<u> </u>					ļ			ļ	
Peripheral Vascular	P*	P* _	P*		P*	P*	P*	P*	P*	P*	
Musculo-skeletal Conventional											
Musculo-skeletal Superficial									ļ		<u> </u>
Other ^[4]	P*	P*	P*		P*	P*	P*	P*	P*	P*	
Exam Type, Means of Access			<u>_</u>								ļ
Transesophageal			<u> </u>								ļ
Transrectal						·					ļ
Transvaginal			<u> </u>								
Transuretheral											
Intraoperative (specify)					ļ <u>.</u>			ļ	ļ		
Intraoperative Neurological				<u> </u>					ļ		ļ
Intravascular			L								<u> </u>
Laparoscopic											

N = new	indication; P* = previously cleared by FDA on LOGIQ E9(K123564); E = added under Appendix E
Notes: [[1] Abdominal includes GYN/Pelvic, Renal and Aorta-iliac artery;
[[4] Other use includes Urology/Prostate;
ı	*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
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Prescription User (Per 21 CFR 801.109)

Page 11 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 9L-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					Mode	of Op	eratio	n			
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	T	Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic			<u> </u>					,			
Fetal / Obstetrics											
Abdominal			<u> </u>								
Pediatric	Р	Р	P		Р	Р	P	P	P	Р	
Small Organ ^[2]	Р	Р	P		. Р	Р	P	Р	P	Р	
Neonatal Cephalic			<u> </u>								
Adult Cephalic			<u></u>								ļ
Cardiac			<u> </u>								ļ
Peripheral Vascular	Р	Р	Р		Р	P	Р	Р	Р	Р	<u> </u>
Musculo-skeletal Conventional	Р	Р	Р		Р	Р	P	Р	Р	Р	<u> </u>
Musculo-skeletal Superficial			ļ	<u></u>							
Other ^[4]								<u> </u>			<u> </u>
Exam Type, Means of Access			1								
Transesophageal			ļ							ļ	
Transrectal			ļ . <u></u>								<u> </u>
Transvaginal											<u> </u>
Transuretheral											
Intraoperative (specify)								ļ		ļ	
Intraoperative Neurological									<u> </u>	ļ	
Intravascular				· .							<u> </u>
Laparoscopic					<u> </u>						<u> </u>

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [2] Small organ includes breast, testes, thyroid.

[*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.

[+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 12 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 11L-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

											
				,	Mode	of Op	eratio	<u>n_</u>			,
Clinical Application Anatomy/Region of Interest	В	M	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	Power Doppler		Harmonic Imaging	Coded Pulse	RT3E Mode
Ophthalmic			_								
Fetal / Obstetrics					<u> </u>						
Abdominal			ļ					ļ <u> </u>			
Pediatric	Р	Р	Р		Р	Р	Р	Р	Р	P	
Small Organ ⁽²⁾	P	Р	Р		Р	Р	Р	Р_	P	P	
Neonatal Cephalic											<u> </u>
Adult Cephalic					ļ						
Cardiac			ļ								
Peripheral Vascular	Р	Р	Р		Р	Р	р	Р	Р	Р	
Musculo-skeletal Conventional	Р	P	Р		Р	Р	Р	Р	Р	Р	
Musculo-skeletal Superficial								ļ			
Other ^[4]			<u> </u>								
Exam Type, Means of Access											
Transesophageal			ļ								
Transrectal		<u> </u>									
Transvaginal											ļ
Transuretheral									ļ		
Intraoperative ^[5]	Р	Р	P		Р	Р	Р	Р	Р_	Р	ļ
Intraoperative Neurological											
Intravascular			ļ <u> </u>			ļ					
Laparoscopic											<u> </u>

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [2] Small organ includes breast, testes, thyroid.

- [5] Intraoperative includes abdominal, thoracic (cardiac), and vascular (PV).
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 13 of 23

Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with M5S-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

				•	Mode	of Op	eratio	n			
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler			Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic						<u> </u>					
Fetal / Obstetrics	P	Р	P	Р	Р	P	Р	Р	Р	Р	_
Abdominal	Р	р	Р	P	Р	P	Р	Р	P	P	
Pediatric	Р	Р	P	Р	Р	Р	Р	Р	Р	Р	
Smali Organ ^[2]											
Neonatal Cephalic	 										
Adult Cephalic	Р	Р	Р	Р	Р	Р	Р	P	P.	Р	
Cardiac ^[3]	Р	Р	P	Р	Р	Р	Р	Р	Р	Р	
Peripheral Vascular											
Musculo-skeletal Conventional											
Musculo-skeletal Superficial				<u> </u>							
Other ^[4]	Р	Р	Р	Р	P	Р	P	Р	Р	Р	
Exam Type, Means of Access											
Transesophageal											
Transrectal											
Transvaginal											
Transurethera!					<u> </u>		<u> </u>	ļ			
Intraoperative (specify)						ļ					
Intraoperative Neurological											
Intravascular											
Laparoscopic	,					<u> </u>		<u> </u>			

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [2] Small organ includes breast, testes, thyroid.

- [3] Cardiac is Adult and Pediatric.
- [4] Other use includes Urology/Prostate
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 14 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with M5Sc-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

		<u> </u>		•	Mode	of Op	eratio	n			<u></u>
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler		Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic											
Fetal / Obstetrics	N	N	N	N	N	N	N	N	N	N	
Abdominal	N	N	N	N	N	N	N	N	N	N	
Pediatric	N	N	N	N	N	N	N	N	N	N	
Small Organ ⁽²⁾											
Neonatal Cephalic						_					
Adult Cephalic	N	N_	N	N	N	N	N	N	N	N	
Cardiac ⁽³⁾	N	N	N	N	N	N	N	N	N	N	
Peripheral Vascular			<u> </u>								
Musculo-skeletal Conventional											
Musculo-skeletal Superficial											
Other ^[4]	N	N	N	N	N	N	N	N	N	N	
Exam Type, Means of Access											
Transesophageal			ļ								
Transrectal											
Transvaginal											
Transuretheral											
Intraoperative (specify)											
Intraoperative Neurological											
Intravascular											
Laparoscopic											

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [2] Small organ includes breast, testes, thyroid.

- [3] Cardiac is Adult and Pediatric.
- [4] Other use includes Urology/Prostate
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 15 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 6S-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					****				-		
					Mode	of Op	eratio	n			
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	Power Doppler	Combined Modes	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic										•	
Fetal / Obstetrics	Р	Р	Р	Р	Р	Р	Р	Р	P	Р	ļ
Abdominal	Р	Р	Р	Р	Р	Р	Р	Р	P	Р	
Pediatric	Р	Р	Р	Р	Р	P	Р	Р	Р	Р	
Small Organ ^[2]											
Neonatal Cephalic	Р	Р	Р	Р	Р	Р	P	Р	Р	Р	
Adult Cephalic								ļ			<u> </u>
Cardiac ^[3]	Р	P	P	Р	P	Р	Р	Р	Р	Р	
Peripheral Vascular											
Musculo-skeletal Conventional											
Musculo-skeletal Superficial											
Other ^[4]											
Exam Type, Means of Access											<u> </u>
Transesophageal								1			
Transrectal		,				ļ					<u> </u>
Transvaginal											ļ
Transuretheral											· · · · · ·
Intraoperative (specify)											<u> </u>
Intraoperative Neurological											
Intravascular											
Laparoscopic			<u> </u>	<u> </u>	<u> </u>	<u> </u>					

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [2] Small organ includes breast, testes, thyroid.

- [3] Cardiac is Adult and Pediatric.
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [+] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 16 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 3V-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

	•				Mode	of Op	eration	າ			
Clinical Application Anatomy/Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	Power Doppler		Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic			<u> </u>								
Fetal / Obstetrics	Р	Р	Р	Р	Р	Р	Р	Р	Р	P	Р
Abdominal	Р	Р	Р	Р	P	Р	Р	Р	Р	Р	Р
Pediatric	Р	Р	Р	Р	Р	Р	P	Р	P	Р	Р
Small Organ ^[2]											
Neonatal Cephalic											
Adult Cephalic	Р	P	P	Р	Р	Р	Р	Р	Р	Р	Р
Cardiac ^[3]	Р	Р	P	Р	Р	P	Р	Р	P	Р	Р
Peripheral Vascular									ļ	L	ļ
Musculo-skeletal Conventional										ļ <u>.</u>	
Musculo-skeletal Superficial			<u></u>								
Other ^[4]	Р	P	Р	P	Р	Р	Р	Р	Р	Р	Р
Exam Type, Means of Access											ļ
Transesophagea!											
Transrectal					<u> </u>					ļ.	
Transvaginal		·	<u> </u>								
Transuretheral											ļ
Intraoperative (specify)							<u> </u>				<u> </u>
Intraoperative Neurological											
Intravascular											<u> </u>
Laparoscopic											<u> </u>

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [2] Small organ includes breast, testes, thyroid.

- [3] Cardiac is Adult and Pediatric.
- [4] Other use includes Urology/Prostate
- [*] Combined modes are B/M, B/Color M, B/PWD, B/Color/PWD, B/Power/PWD.
- [*] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 17 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 6VT-D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

											
					Mode	of Op	eratio	n			
Clinical Application Anatomy/ Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	Power Doppler		Harmonic Imaging	Coded Pulse	RT3D Mode
Ophthalmic											
Fetal / Obstetrics											
Abdominal											
Pediatric			<u> </u>								
Small Organ (specify)											
Neonatal Cephalic			ļ								
Adult Cephalic			ļ ·								
Cardiac	·P	P	P	Р	P	Р	Р	Р	Р	Р	P
Peripheral Vascular											
Musculo-skeletal Conventional			ļ								
Musculo-skeletal Superficial			ļ				,				
Other (specify)											
Exam Type, Means of Access			<u></u>								
Transesophageal	P	Р	P	Р	Р	Р	P	P	Р	Р	Р
Transrectal											
Transvaginal			ļ								
Transuretheral											
Intraoperative (specify)				ļ							
Intraoperative Neurological											
Intravascular				<u> </u>							
Laparoscopic											

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [*] Combined modes are B/M, B/Color M, B/PWD or CWD, B/Color/PWD or CWD, B/Power/PWD.

[*] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 18 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 6T/6T-RS Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

			·		Mode	of Op	eratio	n			
Clinical Application Anatomy/ Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M	Power	Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic									_		
Fetal / Obstetrics				ļ	<u> </u>						
Abdominal											
Pediatric											
Small Organ (specify)											
Neonatal Cephalic			<u> </u>								
Adult Cephalic			ļ								
Cardiac	Р	Р	Р	Р	Р	Р	Р	P	Р	Р	
Peripheral Vascular			ļ								ļ
Musculo-skeletal Conventional			<u> </u>								
Musculo-skeletal Superficial								ļ			
Other (specify)											<u> </u>
Exam Type, Means of Access											
Transesophageal	Р	Р	P	P	P	Р	P	Р	Р	Р	
Transrectal					ļ						ļ
Transvaginal											
Transuretheral					ļ						
Intraoperative (specify)						ļ	<u> </u>	ļ <u> </u>			
Intraoperative Neurological											<u> </u>
Intravascular											
Laparoscopic											

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [*] Combined modes a	are B/M,	B/Color M,	B/PWD or CWD,	B/Color/PWD or CWD	, B/Power/PWD.
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[*] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 19 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 6Tc/6Tc-RS Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					Mode	of Op	eratio	n	•		
Clinical Application Anatomy/ Region of Interest	В	M	PW Doppler	CW Doppler	Color Doppler	Color M	Power	Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*
Ophthalmic						,					
Fetal / Obstetrics			<u> </u>								
Abdominal			<u> </u>								
Pediatric											
Small Organ (specify)			<u> </u>					<u> </u>			
Neonatal Cephalic								<u> </u>			
Adult Cephalic			<u> </u>			<u> </u>		<u> </u>			
Cardiac	Р	Р	P	Р	Р	Р	Р	Р	Р	Р	
Peripheral Vascular											
Musculo-skeletal Conventional					<u> </u>						
Musculo-skeletal Superficial					<u></u>						
Other (specify)									:		
Exam Type, Means of Access			ļ <u></u>								
Transesophageal	Р	Р	Р	Р	Р	Р	Р	Р	P	_ P	
Transrectal											
Transvaginal											
Transuretheral											
Intraoperative (specify)						ļ					
Intraoperative Neurological											
Intravascular											
Laparoscopic											

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [*] Combined modes are B/M, B/Color M, B/PWD or CWD, B/Color/PWD or CWD, B/Power/PWD.

[*] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 20 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with 9T/9T-RS Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

	Mode of Operation											
Clinical Application Anatomy/ Region of Interest	. B	М	PW Doppler	CW Doppler	Color Doppler	Color M	Power	Combined	Harmonic Imaging	Coded Pulse	RT3D Mode*	
Ophthalmic												
Fetal / Obstetrics												
Abdominal												
Pediatric												
Small Organ (specify)								<u> </u>				
Neonatal Cephalic		ļ			<u> </u>							
Adult Cephalic												
Cardiac [3]	Р	Р	P	Р	Р	Р	Р	Р	Р	P		
Peripheral Vascular		<u> </u>	<u> </u>									
Musculo-skeletal Conventional												
Musculo-skeletal Superficial			<u> </u>								<u> </u>	
Other (specify)												
Exam Type, Means of Access												
Transesophageal-	P	P	P	Р	Р	Р	Р	Р	Р	P		
Transrectal												
Transvaginal		ļ										
Transuretheral												
Intraoperative (specify)			ļ									
Intraoperative Neurological			<u> </u>					ļ				
Intravascular			<u> </u>									
Laparoscopic												

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [*] Combined modes are B/M, B/Color M, B/PWD or CWD, B/Color/PWD or CWD, B/Power/PWD.

[3] Cardiac is Adult & Pediatric

[*] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 21 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with P2D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

					Mode	of Op	eratio	n			
Clinical Application Anatomy/ Region of Interest	В	М	PW Doppler	CW Doppler	Color Doppler	Color M Doppler			Harmonic Imaging	Coded Pulse	RT3D Mode
Ophthalmic											
Fetal / Obstetrics											
Abdominal											
Pediatric					ļ. <u>.</u>						
Small Organ (specify)								`			
Neonatal Cephalic									ļ		
Adult Cephalic					<u> </u>						ļ
Cardiac ^[3]			Р	Р							
Peripheral Vascular		<u> </u>	P	Р							
Musculo-skeletal Conventional											
Musculo-skeletal Superficial			<u> </u>				,				ļ
Other (specify)	•••			<u></u>							<u> </u>
Exam Type, Means of Access											ļ .
Transesophageal											
Transrectal											
Transvaginal			ļ			ļ					
Transuretheral											<u> </u>
Intraoperative (specify)											
Intraoperative Neurological											ļ
intravascular						_					
Laparoscopic											

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes:	[3]	Cardiac	is	Adult	and	F	ediatric.
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[*] RT3D is Realtime 3D / 4D volume tissue scan acquisition (with or w/o color flow);

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Prescription User (Per 21 CFR 801.109)

Page 22 of 23



Diagnostic Ultrasound Indications for Use Form GE Vivid E9 with P6D Transducer

Intended Use: Diagnostic ultrasound imaging or fluid flow analysis of the human body as follows:

	Mode of Operation										
Clinical Application Anatomy/ Region of Interest	В	M	PW Doppler	CW Doppler	Color Doppler	Color M Doppler	Power Doppler		Harmonic Imaging	Coded Pulse	RT3D Mode
Ophthalmic											
Fetal / Obstetrics								ļ			
Abdominal			<u> </u>								
Pediatric			ļ								
Small Organ (specify)								ļ <u>.</u>			
Neonatal Cephalic			ļ								
Adult Cephalic			<u> </u>								
Cardiac ^[3]			P	Р				· ·			
Peripheral Vascular			Р	Р							
Musculo-skeletal Conventional	·										
Musculo-skeletal Superficial											
Other (specify)											
Exam Type, Means of Access									:		<u> </u>
Transesophageal											
Transrectal											
Transvaginal											
Transuretheral											
Intraoperative (specify)						ļ. <u>.</u> .					<u> </u>
Intraoperative Neurological											
Intravascular											
Laparoscopic											

N = new indication; P = previously cleared by FDA; E = added under Appendix E

Notes: [3] Cardiac is Adult and Pediatric.	
[*] RT3D is Realtime 3D / 4D volume tissue scan acquisiti	on (with or w/o color flow);
. (PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE O	N ANOTHER PAGE IF NEEDED)
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Prescription User (Per 21 CFR 801.109)	Page 23 of 23
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(Division Sign-Off) Division of Radiological Health	

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